

## Foster Family Home - Corrective Action Report

Provider ID: 1-180024

Home Name: Ophelia Basuel, CNA

Review ID: 1-180024-1

91-561 Papipi Road

Reviewer: Carrie Wakai

Ewa Beach

HI 96706

Begin Date: 6/5/2018

End Date: 6/5/2018

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

6.d.1-Home visit made for a new 2 client CCFFH certification survey. Home was in compliance with all requirements.

Carrie Wakai RN  
Compliance Manager

Ophelia Genesine P. Basuel  
Primary Care Giver

6-5-18  
Date

6-5-18  
Date